

DEPARTMENT OF VETERANS AFFAIRS NEBRASKA-WESTERN IOWA HEALTH CARE SYSTEM

Omaha 4101 Woolworth Avenue Omaha NE 68105-1873

Lincoln 600 S 70th Street Lincoln NE 68510-2493

Grand Island 2201 N Broadwell Avenue Grand Island NE 68803-2196

February 5, 2013

In Reply/Refer To: 636/117

Alex Willford Grand Island State Veterans Homes 2300 W. Capitol Ave. Grand Island, NE 68803

Dear Mr. Willford:

This letter is to confirm that the Grand Island State Veterans Home has received full certification for the Nursing Home and Domiciliary for 2012-2013 as of October 16, 2012. The survey team reviewed the evidence of implementation of the corrective action plan and determined that your facility was in compliance with all VA standards.

Thank you for your continued service to our nation's Veterans.

Sincerely,

MARCI MYLAN, Ph.D.

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Director

JORGE I. RAMIREZ, M.D., FAAHPM

Acting Director VISN 23

Extended Care and Rehab Service Line

cc: John Hilgert, Nebraska Department of Veterans Affairs

cc: Janet P. Murphy, Network Director VISN 23

cc: Jon Fuller, MD, Acting Chief Consultant, VA Geriatrics and Extended Care

cc. Chief Network Officer (10N)

DEPARTMENT OF VETERANS AFFAIRS NEBRASKA-WESTERN IOWA HEALTH CARE SYSTEMS ANNUAL SURVEY - 2012

GRAND ISLAND VETERANS' HOME

ACCIDENTS		
Inspector determines that the nursing home failed to:	Inspection Date	Date of Correction
Ensure that each resident receives adequate supervision and	06/12/2012	11/05/2012
assistance devices to prevent accidents. (Smoking)		
ADMINISTRATION	J	
Inspector determines that the nursing home failed to:	Inspection Date	Date of Correction
Be administered in a manner that enables it to use its	06/12/2012	11/15/2012
resources effectively and efficiently. (Smoking)		
QUALITY ASSURANCE SERVICES		
Inspector determines that the nursing home failed to:	Inspection Date	Date of Correction
Implement appropriate plans by the quality assessment and	06/12/2012	09/19/2012
assurance committee. (Smoking)		
CLINICAL RECORDS	S	
Inspector determines that the nursing home failed to:	Inspection Date	Date of Correction
Conduct or coordinate the accuracy of assessments with the	06/12/2012	09/19/2012
appropriate participation of health professionals.		
SERVICES PROVIDED OR ARRANG	ED BY FACILIT	Υ
Inspector determines that the nursing home failed to:	Inspection Date	Date of Correction
Provide by qualified persons in accordance with each resident's	06/12/2012	09/19/2012
written plan of care.		
MENTAL & PSYCHOSOCIAL FU	INCTIONING	
Inspector determines that the nursing home failed to:	Inspection Date	Date of Correction
Ensure that a resident, who displays mental or psychosocial	06/12/2012	09/19/2012
adjustment difficulty, receives appropriate treatment and		
service.		
PHYSICAL ENVIRONMENT (NURSING	G & DOMICILIA	ARY)
Inspector determines that the nursing home failed to:	Inspection Date	Date of Correction
Maintain the emergency battery powered lighting system.	06/12/2012	08/13/2012